

REMARKS

Drawings

Applicant has enclosed new formal drawings.

35 U.S.C. §101

Claims 1-59 are pending in this application. Claims 1-11, 12-23 and 40-52 are rejected under 35 U.S.C. §101 because the claimed invention is directed to non-statutory subject matter. These claims have been amended herein in accordance with the suggestions made by the Patent Office. Reconsideration of this rejection is requested.

35 U.S.C. §103

Claims 1-59 are rejected under 35 U.S.C. §103(a) as being unpatentable over Tarter et al (5,704,404) in view of Bosco et al (5,191,522). While Applicant appreciates the teachings of Tarter in view of Bosco, a close examination of these patents do not render the present invention obvious.

Tarter teaches and discloses a Computerized Healthcare Accounts Receivable Management System that does not reprice a reimbursement claim under a contract by converting the contract and claims into terms and codes, comparing the terms and codes, determining priority conditions, eliminating matching terms that are excluded by the priority conditions and then calculating a reimbursement amount for the claim by processing non-eliminated matching terms - in accordance with Claims 1, 12, 24, 32, 33, 40, 41 and 53 of the present invention. Tarter discloses and teaches the management of accounts receivables which includes purchasing receivables from third parties, checking the credit worthiness of a payor for a specific claim, processing the receivables, collecting funds based on the receivables, reconciling the receivables based on collected funds, and securing additional funds to purchase more receivables. Tarter fails to disclose or teach even a single aspect of Applicants claimed invention. Moreover, these shortcomings are not made up by Bosco. Bosco is directed to processing and reporting group insurance accounts. The only aspect of Bosco that discusses insurance claims is Col 17, lines 25-37, which details a relationship between the insurance

claim and different entities it is related to. Bosco does not describe, teach or suggest how to reimburse the insurance claim against a contact. The Office's combination of Tarter and Bosco in finding the present invention obvious is tantamount to hindsight and is impermissible.

In regard to Claims 2, 3, 14, 19, 42, 43, 47, and 57 the referenced sections cited by the Office in Tarter does not refer to priority conditions as claimed but refers to a help screen offered by the software described by Tarter. Its full relevancy is questionable, reconsideration is respectfully requested.

In regard to Claims 4, 7, 9, 16, 17, 25, 29, 30, 31, 44, and 45 the Office cites sections (Col 13 and 14) in Tarter that deal with processing fund transfer transactions for already approved claims and not with how the claims are processed for reimbursement. These sections does not describe sequentially comparing claim code to qualification codes; determining reimbursement amounts; identifying a governing contract when more than one contract may apply; eliminating matching terms that are excluded by claim priority conditions; identifying rate terms and arranging the rate terms sequentially; categorizing rate terms by a hierarchy sequence; and assigning priority conditions based on the categorized rate terms. The Office also cites Figure 44a of Tarter as teaching for some of the above identified claims in this application, however this aspect of Tarter deals with reconciliation and collection on already paid claims and not with comparing the claim against the qualification codes to identify matching terms as presently claims.

In regard to Claims 5, 6, 18, 26, 27, 28, 46, 52, and 54 the Office cites Cols 5 and 6 of Tarter to teach applicants invention. However, a closer review of these sections show that the insurance claim is sent to an outside processor to determine whether payment should be made. Tarter does not deal with this side of the processing but with the collection or payments and management of receivables of processed claims. Applicant's invention however, deals with the repricing of reimbursement claims, the exact aspect of which Tarter does not handle.

In regard to Claims 8, 11, 21, 34, 35, 49, 55, and 56 the sections cited in Tarter teach coding discrepancies between payments and claims. These sections do not disclose the repricing of a reimbursement claim and specifically converting the claim to a code for repricing; or assigning a highest or lowest governing reimbursement amount.

In regard to Claims 10, and 39 the Office identifies sections in Tarter that deal with storing duplicate claims and not with identifying multiple governing contracts against a claim and repricing the claim against both governing contracts.

In regard to Claims 13, 15, 22, 23, 38, 50 and 51 the Office cites portions of Bosco that deal with defining claims, claim benefits, producer contract categories and the submitting a claim for reimbursement. Bosco, however, does not teach or suggest identifying contractual terms as matching a claim code, determining priority conditions associated to the matching terms, and eliminating matching terms based upon the priority conditions such that a reimbursement charge for each claim line may be determined.

In regard to Claim 36, the section highlighted by the Office discloses how the operator of the system resolves an exception item. This portion does not disclose or teach how a program is able to bundle multiple claims into a single claim, or how to identify when multiple claims need to be bundle together.

In regard to Claim 37, the Office is trying to analogize Tarter's use of a program to generate reports to Applicant's claimed invention of storing calculation codes, qualification codes and priority codes defined by a rate sheet on a computer system. While storing information is a well known process, Applicant's claimed invention stores information that has not been stored in the past for subsequent retrieve and processing that has not been done in the past.

In regard to Claim 48 and 59, the background of Tarter's invention does discuss how administrators and how they service prescription plans, but it does not disclose or teach the claimed invention, nor the ability to identify a governing contract out of multiple contracts and determine the reimbursement amount only based upon the governing contract. Nor does Tarter's invention disclose or teach storing rate sheets in a plurality of networks and the ability to identifier the network corresponding to a specific rate sheet identifier code and to store the rate sheet corresponding to a specific rate sheet identifier code in the network corresponding thereto.

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In regard to Claim 58, the Office identifies portions of Tarter that deal in On-line inquiries and not with the ability to edit calculation codes, qualification codes and priority codes of a rate term of a rate sheet.

In view of the above amendments and remarks reconsideration is respectfully requested. Applicant respectfully requests that a timely Notice of Allowance be issued in this case, as this case was filed on May 23, 2000 and the first Office Action was mailed in August 27, 2003.

If the Office has any questions, please contact the undersigned at 312-521-2775.

Respectfully submitted,

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